

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Building Permit

Permit Number: BP2006-103

Page 1 of 1

Printed: 8/22/2006

ADDRESS:

721 Perry St. S.

Applicant

Approval Date:

Name: MRI Construction
Address: PO Box 669
Napoleon, OH 43545

Owners

Name: Mr. Paul Bressler
Address: 721 S Perry St
Napoleon, OH 43545

Contractors

Contractor Type: Builder

Name: MRI Construction
Address: PO Box 669

Napoleon, OH 43545

Phone: 419-438-2489

Fees and Receipts:

Number	Description	Amount
FEE2006-382	Reroofing/Siding/Gutters (Auto	\$20.00

Total Fees: \$20.00

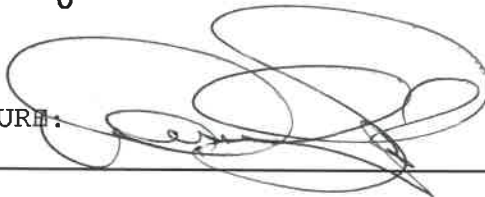
RCPT2006-201		\$20.00
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Total Receipts: \$20.00

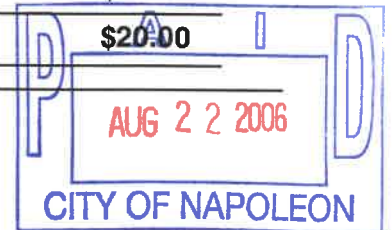
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re-roofing

APPLICANTS SIGNATURE:



DATE: 8-22-06



CITY OF NAPOLEON GENERAL PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING MECHANICAL, DEMOLITIONS, REMODELING.

DATE: 8-22-06 JOB LOCATION: 721 S. Perry St.

OWNER: Paul Bessler PHONE: _____

OWNER ADDRESS: 721 S. Perry St. CITY: Nap ZIP: 43545

CONTRACTOR: MRI Contract Construction

PHONE #: _____ CELL PHONE#: 419-438-2489

CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES NO:

Is any of the above job going to be subcontracted out? Yes No:

If yes to whom: _____

DESCRIPTION OF WORK TO BE PERFORMED:

ESTIMATED COMPLETION DATE: 8-23-06

PLEASE MARK THE TYPE OF WORK YOU WILL BE PERFORMING

- | | |
|-----------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> A/C ADD ON | <input type="checkbox"/> REMODELING |
| <input type="checkbox"/> BOILER REPLACEMENT | <input checked="" type="checkbox"/> ROOFING |
| <input type="checkbox"/> CURBING | <input type="checkbox"/> SEWER REPAIRS** |
| <input type="checkbox"/> DECKS * | <input type="checkbox"/> SIDEWALK* |
| <input type="checkbox"/> DRIVEWAY* | <input type="checkbox"/> SIDING |
| <input type="checkbox"/> ELECTRICAL SERVICE UPGRADE | <input type="checkbox"/> STORAGE SHED* |
| <input type="checkbox"/> ELECTRICAL SERVICE NEW | <input type="checkbox"/> SWIMMING POOL* |
| <input type="checkbox"/> FENCE* | <input type="checkbox"/> FURNACE REPLACEMENT |
| <input type="checkbox"/> ADDITIONS* | <input type="checkbox"/> TEMP ELECTRIC |
| <input type="checkbox"/> FURNACE NEW | <input type="checkbox"/> WATER TAP (size _____") |
| <input type="checkbox"/> LAWN METER | <input type="checkbox"/> WINDOWS |
| <input type="checkbox"/> PLUMBING | <input type="checkbox"/> ZONING |

*PLEASE INCLUDE A PICTURE SHOWING MEASUREMENTS FROM EXISTING STRUCTURES AND PROPERTY LINES. INDICATING THE TYPE OF WORK YOU WISH TO PERFORM.

** IF WORK REQUIRES GOING INTO THE STREET A STREET BOND IS REQUIRED!

FOR PERMIT COSTS PLEASE FILL OUT REVERSE SIDE